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	aves of the same	٠.:

PATE	NT APPLIC	ATIO	N FEE DETE					7004		1
Substitute for Form PTO-S75  CLAIMS AS FILED - PART I (Cotonii: (Cotonii: 2)					SHALL ENTITY		OR	. OTHER THAN		
				Aurer 21		1	1			┨
FOR BASIC FEE	MUNISI	ER FILED	MUNE	ER EXIRT.	RAIT	FEE	1	RATE	FEE	-
(37 CFR 1.16(a)) TOTAL CLAIMS	<del></del>				<b> </b>	<u> </u>	OR		S	4
(37 CFR 1.18(c))		minus 20			AS .		OR.	x \$ *		1
INDEPENDENT CLARIS (37 CFR 1,16(b))	1	minus 3			N.S	ļ	OR	λ S •	·	
NULTIPLE DEPENDENT CLAMI PRESENT 137 CFR 1.16:c::			+ 5		OR	+5=		]		
" If the difference in colu	mn 1 & less tha	n Zerc. er	iler "0" in column	2.	10141		OR	TOTAL		] .
CLA	IMS AS AMI	ENDED	∸ PART II		•	•			•	
1. 1			•		•	٠.		OTHER	THAN	
9/28/05	(Column 1)		(Column 2)	(Cotumn 3)	SMALL E	ENTITY	OR	SMALL		]
	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	· ADDI- TIONAL		RATE	ADDI- TIONAL	
Your -	4 0	Minus	PAID FOR			FEE .				٠ ــــا
M 100 00 4 1 100 100 100 100 100 100 100	<u> </u>	Mirars			X 5	· ·	QR	X 5 =		1
	3	минадъ	_3_		x \$		OR.	≯ S=		
FIRST PRESENTATI	ON OF WALTPLE	E DEPENO	BIT CLARE 127 CF	R 1,15(C1)	+5=		OR	₹\$ <sub>.(2)</sub> , 9;		<b></b>
l i			• .		TOTAL ACC'L FEE		CÆ	ADD L FEE		]
14/24/06	(Caturan 1)		(Cotumn 2)	(Coums 3)	•			•		1
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Z U Total A Total C To	37	Minus	39	10	ું ⊋≲. 00		OR	<b>30. V</b>	/	]
Z Independent :	7	Minus	7	V	100.00		OR	300.00	<u></u>	<u> </u>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (27 CFR 1.16(d))					+5		OR	2		
	•				TOTAL ADD'L FEE		OR	ADD FEE		
	(Column 1)		(Cotumn 2)	(Column 3)					· /	]
	CLAIMS		HIGHEST					ř –		1
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Total		Miraes	** '	•	xs.	FEE	· ~~	빌	7,7,5	
Z Independent		Monus	<del></del>				OR,		-	<del>  `</del>
Total					X 5 *		OR.	N	· · · · ·	<b> </b>
FIRST PRESENTATION OF MULTIPLE DEPENDENT QUAL 427 OFR 1,15idy					TOTAL		OR	FGTAL	361 1011	<u> </u>
		•	•		ADDL FEE		OR:	ADD'L FEE		]
" If the entry in colur " If the "Highest Num	nter Previously	Pad For		s less than 20.	enter 1201.		-	1 0 € € €*** 1 0 1 ± 6****		···

The "Highest Number Previously Paid For" (N THIS SPACE is less than 3, erder "3".

The "Highest Number Previously Paid For" (Total or Independent) is the August rumber found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the cubic which is to file (and by the USPTO to process) an application. Confidentiately is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed activation from the emount of time you require to complete this form and/or suggestions for recovery this power, and the Charlet the Charlet Information Officer, U.S. Department of Commerce, P.O. Box 1459, Alexandria, VA 22313-1450.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.